Best Available Copy

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

09897929

CLAIMS AS FILED - PART I								SMALL EI	YTITY		OTHER	THAN
			(Column	1)	(Column 2)		, 1	TYPE		OR SMALLE		ENTITY
TOTAL CLAIMS .			28					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			28 minus 20=		- 3			X\$ 9=		OR	X\$18=	144
INDEPENDENT CLAIMS			21 minus 3 =		18			X40=		OR	X80=	1440
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
If the difference in column 1 is less than zero, enter "0" in						olumn 2	I	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II								·		•	OTHER	THAN
(Column 1) (Column 2) (Column 3)								SMALL I	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE
	T tal.	. 28	Minus	-29	1	• 0		X\$ 9=	"]	6	"X\$18="	
AME	Independent	NTATION OF MI	Minus					X40=		OR.	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
all min Kly								TOTAL DOIT, FEE		OR	TOTAL ADDIT, FEE	
L	+11711U		OUII. FEE			, ADUII. PEEI						
_		CLAIMS REMAINING		(Colur HIGH	EST	(Column 3)	r		ADDI-			ADDI-
ENT		AFTER AMENDMENT	PREVIO PAID		DUSLY	PRESENT		RATE	TIONAL		BATE	TIONAL
AMENDMENT B	Total	· 义	Minus	<i>Ö</i>	3 <u>X</u>	5	lΓ	X\$ 9=		ØĦ	X\$18=7	
	Independent	•	Minus	••• c	2/	<u> -</u>		X40=		OR	X80=	1
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ľ					
,								+135=		OR	+270€	
		•					A	TOTAL DOIT, FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												-
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		= ·	П	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	•••				X40=			X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	7.00-	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
** (I the "Highest Nu	mber Previousty Pa	id For IN THIS	S SPACE is	s less than	n 20 enter "20 '		YOYAL DOIT, FEE		OR	TOTAL	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE												
		,	-	-					-,			